

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983
 IN THE UNITED STATES DISTRICT COURT
 FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT



Dickerson 232596
 (Last Name) (Identification Number)
Justin Dwayne
 (First Name) (Middle Name)
East Mississippi Correctional Facility
 (Institution)
10641 Hwy 80 West Meridian, MS 39301
 (Address)
 (Enter above the full name of the plaintiff, prisoner and address
 of plaintiff in this action)

V.

CIVIL ACTION NUMBER: 3:21-cv-682-KHJ-MTP
 (to be completed by the Court)

Simpson County Sheriff Department
investigator Chris Wallace

Mendenhall, MS 39114
 (Enter the full name of the defendant(s) in this action)

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated?
 Yes (✓) No ()
- B. Are you presently incarcerated?
 Yes (✓) No ()
- C. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
 Yes () No (✓)
- D. Are you presently incarcerated for a parole or probation violation?
 Yes () No (✓)
- E. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes (✓) No ()
- F. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes (✓) No ()

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank.)

I. Name of plaintiff: Justin Dickerson Prisoner Number: 232596

Address: 10641 Hwy 80 West - Meridian, MS 39307

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions and places of employment of any additional defendants.)

II. Defendant: Chris Wallace is employed as Investigator

at Simpson County Sheriff's office

The plaintiff is responsible for providing his/her address and in the event of a change of address, the new address of plaintiff as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME:

Justin Dickerson

ADDRESS:

10641 Hwy 80 West Meridian, MS 39307

DEFENDANT(S):

NAME:

Chris Wallace

ADDRESS:

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any lawsuits in a court of the United States? Yes () No (✓)
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse of this page or additional sheets of paper.)

CASE NUMBER 1.

1. Parties to the action: _____

2. Court (if federal court, name the district; if state court, name the county): _____

3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

CASE NUMBER 2.

1. Parties to the action: _____

2. Court (if federal court, name the district; if state court, name the county): _____

3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet(s) if necessary).

I Call & Mailed information to Simpson County DHS of
what someone is saying about me THE caseworker Called
Simpson County Sheriff Dept and Talked TO inv Chris Wallace
and Said they already investigated it but Refuse to
Come off of the Report of investigation by Simpson
County Sheriff's Office

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

\$ 150.00 in Fees and Come off of Report of
investigation by Simpson County Sheriff's Office To Me

Signed this 19 day of October, 2021

I declare (or certify, verify or state) under penalty of perjury that the foregoing is true and correct.


Signature of plaintiff